

REMARKS

Claims 1-8 and 11-20 are pending in this application.

Claims 1, 2, 8 and 15 have been amended for purposes of clarity to recite that the first and second windows each display “a list of user selected ones of said plurality of available medical parameter labels to be displayed”. Support for these amendments is found throughout the specification and specifically in Figures 3A and 3D and the corresponding description.

In paragraphs 22-33 of the Office Action (“Response to Arguments”), it is stated that applicants argue that the Schoenberg patent teaches certain features of the present invention. It is respectfully submitted that applicants arguments submitted in the previous response filed on April 11, 2005 argued that the Schoenberg patent does not teach the cited features.

Rejection of Claims 1-5, 15, 18 and 20 under 35 USC § 102(e)

Claims 1-5, 15, 18 and 20 are rejected under 35 U.S.C. 102(e) as being anticipated by Schoenberg et al. (U.S. Patent No. 6,322,502).

The present claimed invention recites a network compatible configurable user interface system for displaying sequentially generated patient medical parameters and data together with a time indication, for use in identifying a parameter value trend. The system includes a display menu generator for generating a single customization menu enabling user selection of parameters for display in a first graphical format and in a second tabular format. The customization menu includes a menu containing a set of medical parameter labels representing a corresponding plurality of available medical parameters. The customizable menu also includes a first window for displaying a list of user selected ones

of the plurality of available medical parameter labels to be displayed in a graphical format and a second window for displaying a list of user selected ones of the plurality of available medical parameter labels to be displayed in a tabular format. The customizable menu further includes parameter selection icons enabling user selection of medical parameter labels from the menu and display of the selected medical parameter labels in a selected one of the first and second windows. A user is able to configure a user interface image display by selecting a first of the medical parameter labels from the menu for display in the first window and display of a medical parameter associated with the first of the medical parameter labels exclusively in graphical format and a second of the medical parameter labels from the menu for display in the second window and display of a medical parameter associated with the second of the medical parameter labels exclusively in tabular format. A display generator displays the selected parameters in graphical and tabular format in response to a user command. Independent claims 1, 8 and 15 each disclose features similar to those discussed above and thus all arguments made concerning such features apply to each of these claims.

Schoenberg discloses a medical information system. The system collects data from various sources and displays the information. The information is divided into subsets of data, each subset is associated with a user job function or user department. While Schoenberg does disclose in column 6, lines 38-41 that “a user may use the graphics button to select graphic only, tabular-only or graphic/tabular (as illustrated) form,” Schoenberg neither discloses nor suggests “a display menu generator for generating a single customizable menu enabling user selection of parameters for display in a first graphical format and in a second tabular format” as in the present claimed invention. Although Schoenberg does disclose a menu bar, contrary to the assertions in the Office Action, the menu bar described in Column 7, lines 22-43 of Schoenberg is not provided for “selecting which elements are to be displayed in the graphical and/or tabular representation of the selected parameters.” The menu bar “shows icons MI1, MI2, MI3, and MI4 which respectively offer the user a choice of one, two, three or four simultaneous displays.” The

menu bar is provided for arranging the number of parameters simultaneously displayed and, unlike the present claimed invention, does not enable “user selection of parameters for display” as in the present claimed invention. The menu bar merely allows the user to choose the number of parameters displayed, not WHICH parameters are to be displayed. The present claimed invention, on the other hand, discloses a “single customizable menu enabling user selection of parameters for display” thus allowing the user to select parameters for display.

In addition, the displays of Schoenberg include parameters in predefined subsets (see column 7, line 58-Column 8, line 6). Specifically, this passage recites “the display 12 is responsive to display signals to generate an image which shows one selected view from a set of possible view[s] of the data...the various possible views are each associated with a job function of a corresponding set of possible system users.” Thus, Schoenberg neither discloses nor suggests “a single customization menu enabling user selection of parameters” as in the present claimed invention. This passage from Schoenberg describes a system in which a user may select a format for viewing a predefined set of parameters.

Additionally, Schoenberg neither discloses nor suggests a customization menu including “a menu containing a set of medical parameter labels” as in the present claimed invention. Schoenberg also neither discloses nor suggests “a first window for displaying a list of user selected ones of said plurality of available medical parameter labels to be displayed in a graphical format” and “a second window for displaying a list of user selected ones of said plurality of available medical parameter labels to be displayed in a tabular format” as in the present claimed invention.

Furthermore, Schoenberg also neither discloses nor suggests “parameter selection icons enabling user selection of medical parameter labels from said menu” as in the present claimed invention. Rather, as described in the cited passage in column 7, lines 36-43 and in Figure 2A, Schoenberg displays different medical parameter data in tables, each table

being associated with a respective tab and including a predefined set of parameters. The table is used to transform display of a parameter between display in tabular and graphical format “to modify and/or customize the images” using a “drag and drop” feature. While column 7, lines 13-22 of Schoenberg describes that “the measured characteristics and the reference parameters are selectively determined by a user,” the selection is not accomplished through the use of a menu with parameter selection icons. Rather, the user views all of the data while deciding what they want displayed and view the data in at least one of the table/graph/table and graph layouts. Schoenberg does not even consider providing a “menu containing a set of medical parameter labels representing a corresponding plurality of available medical parameters” let alone “first and second window areas for displaying user selected parameter labels to be displayed with associated parameter data in graphical and tabular format respectively” as in the present claimed invention. Schoenberg thus also has absolutely no reason to provide “parameter selection icons enabling user selection of medical parameter labels from said menu” as in the present claimed invention.

The single customization menu of the present claimed invention enables the user to select the parameters to view and whether to view the parameters in tabular and/or graphical format independently of one another using the parameter selection icons to add a parameter label to either or both of the first and second windows before displaying the information to the users. After the parameter labels are added to either the first or second windows, the display generator displays these selections in either the chosen graphical or tabular format. While Schoenberg in Column 7, lines 22-36, does disclose the user is able to choose up to four simultaneous displays, where each data set “can be displayed in a variety of formats, including graphical, tabular, bar chart and pie chart formats, with or without split screen,” Schoenberg does not provide the user a single customization menu from which the user is able to choose parameter labels for addition to a first window and display of the parameter associated with the parameter label in graphical format and to choose parameter labels for addition to a second window and display of the parameter

associated with the parameter label in a tabular format as in the present claimed invention. Rather Schoenberg discloses, as described above, that the user selects how they want the data displayed while actually viewing the data, i.e. using a “drag and drop” of parameters from one displayed format to another to modify or customize the images (Column 7, lines 36-37). In the present claimed invention the user uses the parameter selection icons to add or remove medical parameter labels from the first and second windows thereby customizing the graphical and tabular displays.

Also, contrary to the assertion in the Office Action, the icons on the menu bar in Schoenberg described in column 7, lines 22-43 and in Figures 2A and 2B do not allow selection of elements. Rather, the “menu bar shows icons...which respectively offer the user a choice of one, two, three or four simultaneous displays” such as the four graphs shown in Figure 2B. This is wholly unlike the present claimed invention which includes “parameter selection icons enabling user selection of medical parameter labels from said menu and display of said selected medical parameter labels in a selected one of said first and second windows...and exclusively in graphical ...[or] exclusively in tabular format.” The cited passage of Schoenberg is concerned with the format of the display as opposed to the present claimed invention which is concerned with the parameters being displayed. Additionally, while each display in Figure 2B allows the display of medical parameters to be chosen by selectable tabs, these are not “parameter selection icons enabling user selection of parameters from said available medical parameters for display in graphical and tabular format” as in the present claimed invention. Additionally, as Schoenberg uses a “drag and drop” method of customization, dragging a parameter from one display format for display in another, Schoenberg neither discloses nor suggests displaying a medical parameter “exclusively in graphical format and...exclusively in tabular format” as in the present claimed invention.

Furthermore, Schoenberg also neither discloses nor suggests that “a user is able to configure a user interface image display by selecting a first of said medical parameter

labels from said menu for display in said first window and display of a medical parameter associated with said first of said medical parameters exclusively in graphical format and a second of said medical parameter labels from said menu for display in said second window and display of a medical parameter associated with said second of said medical parameters exclusively in tabular format” as in the present claimed invention. Although Schoenberg in column 6, lines 38-41 describe the ability to view data in a table, graph or simultaneously in a table and graph, this is not accomplished by allowing a user to select the display from a menu by choosing medical parameters in a particular window on the menu as in the present claimed invention.

Additionally, claim 15 has been amended to clarify that the “parameter selection icons enabl[e] independent user selection of parameters from said available medical parameters for display in graphical format and independent user selection of parameters from said available medical parameters for display in tabular format”. Such is neither disclosed nor suggested by Schoenberg. Schoenberg only discloses using a “drag and drop” method for moving data between display in tabular and graphical format. Unlike the present claimed invention, there is absolutely no description in Schoenberg concerning a customization menu wherein there is “independent user selection of parameters from said available medical parameters for display in graphical format and...tabular format”.

In view of the above remarks and amendments to the claims, it is respectfully submitted that there is no 35 U.S.C. 112 compliant enabling disclosure in Schoenberg showing the above discussed features. It is thus further respectfully submitted that claims 1 and 15 are not anticipated by Schoenberg. As claims 2-5 and 18 are dependent on claim 1, and claim 20 is dependent on claim 15, it is respectfully submitted that these claims are also not anticipated by Schoenberg. It is thus, further respectfully submitted that this rejection is satisfied and should be withdrawn.

Rejection of Claims 6, 7, 16 and 17 under 35 U.S.C. § 103(a)

Claims 6, 7, 16 and 17 are rejected under 35 U.S.C. 103(a) as being unpatentable over Schoenberg et al.

As discussed above in the arguments concerning the rejection of claims 1 and 15, Schoenberg neither discloses nor suggests “a single customization menu enabling a user to select parameters for display in a first graphical format and in a second tabular format” as in the present claimed invention. Thus, Schoenberg cannot disclose or suggest that the “single customization menu further comprises placement selection icons for re-ordering display of selected parameters” as claimed in claims 6 and 16 of the present claimed invention. Additionally, Schoenberg cannot disclose or suggest the “single customization menu further comprising category selection icons for re-ordering display of the available categories of medical parameters for user selection” as claimed in claims 7 and 17 of the present claimed invention. Further, there is no specific problem recognition or other motivation in Schoenberg for incorporating the claimed features.

In view of the above remarks, the remarks regarding the rejection of claims 1-5, 15, 18 and 20 under 35 U.S.C. 102(e), the amendments to claims 1 and 15 and the dependence of claims 6 and 7 on claim 1 and claims 16, and 17 on claim 15, it is respectfully submitted that claims 6, 7, 16, and 17 are patentable over Schoenberg et al. It is thus, further respectfully submitted that this rejection is satisfied and should be withdrawn.

Rejection of Claims 8, 11-14 and 19 under 35 U.S.C. § 103(a)

Claims 8, 11-14 and 19 are rejected under 35 U.S.C. 103(a) as being unpatentable over Schoenberg and Schwutke et al. (U.S. Patent No. 6,322,502).

Schwuttke describes a system for monitoring and analyzing data and is able to provide a three dimensional representation of complex data, data relationships and system status. Data of greater significance is displayed in the virtual space closer and larger than data of later significance. Tabular data is displayed upon selection of a displayed graphical parameter. As disclosed by Schwuttke in Column 3, lines 42-45, "Rather than representing information in the form of multiple rows and columns of alphanumeric characters, data is depicted in the form of graphic symbols or objects which are positioned within a three-dimensional virtual universe. The cited Figure 2 of Schwuttke shows an output of a typical database monitoring system including both graphical and tabular data while Column 12, lines 14-25 of Schwuttke discusses a cyberspace representation of a wide variety of applications in which varying data is monitored. The passage at column 10, line 65-column 11, line 9 is also cited to show that data in the graphic and pop up text windows is user selectable. However, Schwuttke, similarly to Schoenberg, neither discloses nor suggests "a display menu generator for generating...a customization menu enabling user selection of a default set parameters from a plurality of available sets of default medical parameters and user modification of said default set of medical parameters" as in the present claimed invention. Nor does Schwuttke (with Schoenberg) disclose or suggest that the single customizable menu includes "a menu containing a set of medical parameter labels representing a corresponding plurality of available medical parameters" as in the present claimed invention. Additionally, Schwuttke, similarly to Schoenberg, neither discloses nor suggests "a first window for displaying user selected ones of said plurality of available medical parameter labels to be displayed in a graphical format" and "a second window for displaying user selected ones of said plurality of available medical parameter labels to be displayed in a tabular format. Furthermore, Schwuttke, similarly to Schoenberg, neither discloses nor suggests "parameter selection icons enabling user selection of medical parameter labels from said menu and display of said selected medical parameter labels in a selected one of said first and second windows, wherein a user is able to configure a user interface image display by selecting a first of said medical parameter labels from said menu for display in said first window and display of a medical parameter associated with

said first of said medical parameter labels exclusively in graphical format and a second of said medical parameter labels from said menu for display in said first window and display of a medical parameter associated with said first of said medical parameter labels exclusively in tabular format” as in the present claimed invention.

It is also respectfully submitted that there is no reason or motivation to combine these two references as Schoenberg is directed towards providing subsets of data regarding patient medical information to respective groups of users while Schwuttke is concerned with generation of a three dimensional graphical display used to show relationships between data sets. These references are directed towards providing data in different configurations for different purposes. Schoenberg provides data which is separated into predefined subsets for ease of use directed to the particular person viewing the data while Schwuttke is concerned with three dimensional representations of complex data which provides visual attributes based upon the monitored values of the data to alert the viewer to certain conditions. Neither of these references are concerned with providing a user with a system for customizing the display of graphical and tabular data exclusively of one another as in the present claimed invention.

Additionally, if there is a reason or motivation to combine these two references, such a combination would produce a three dimensional cybergraph of medical data along with optional displays of tabular data, wherein data provided in the graphical and tabular displays being interrelated by clicking and dragging data between the tabular and graphical displays. This combination still neither discloses nor suggests the “customization menu enabling user selection of parameters for display in a first graphical format and in a second tabular format” including “parameter selection icons enabling user selection of medical parameter labels from said menu and display of said selected medical parameter labels in a selected one of said first and second windows, wherein a user is able to configure a user interface image display by selecting a first of said medical parameter labels from said menu for display in both said first window and exclusively in graphical format and a

second of said medical parameter labels from said menu for display in both said second window and exclusively in tabular format” as in the present claimed invention. A combination of Schoenberg and Schwuttke also neither discloses nor suggests that “selection of said user selected parameter labels for display in tabular format is independent of selection of user selected parameter labels for display in graphical format” as in the present claimed invention.

In view of the above remarks it is respectfully submitted that Schoenberg and Schwuttke, when taken alone or in combination provide no 35 USC 112 compliant enabling disclosure showing the above discussed features. It is thus further respectfully submitted that this rejection is satisfied and should be withdrawn.

Having fully addressed the Examiner’s rejections, it is believed that, in view of the preceding remarks, this application stands in condition for allowance. Accordingly then, reconsideration and allowance are respectfully solicited. If, however, the Examiner is of the opinion that such action cannot be taken, the Examiner is invited to contact the applicant’s attorney at the phone number below, so that a mutually convenient date and time for a telephonic interview may be scheduled.

Application No. 09/990,972

Attorney Docket No. 2000P09061US01

No fee is believed due with this response. However, if a fee is due, please charge the fee to Deposit Account 50-2828.

Respectfully submitted,
John E. Auer et al.

By: 

Jack Schwartz

Reg. No. 34, 721

Tel. No. (212) 971-0416

Jack Schwartz & Associates
1350 Broadway
Suite 1510
New York, New York 10018
October 4, 2005



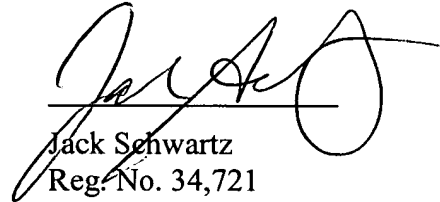
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Jack Schwartz
Reg. No. 34,721